

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

North County Democratic Unity Political Action Coalition

ADDRESS (number and street)

425 W 5th Avenue

Suite 205

☐ Check if different  
than previously  
reported. (ACC)

Escondido

CA

92025

4843

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00382861

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report(Q1)
- ☐ July 15  
Quarterly Report(Q2)
- ☐ October 15  
Quarterly Report(Q3)
- ☒ January 31  
Quarterly Report(YE)
- ☐ July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE-Election**  
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Xavier Martinez

Signature of Treasurer

Electronically Filed by Xavier Martinez

Date

01

23

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

North County Democratic Unity Political Action Coalition

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	7		0	1		2	0	0	7

To:

M	M		D	D		Y	Y	Y	Y
1	2		3	1		2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		9646.76
(b) Cash on Hand at Beginning of Reporting Period .....	15040.45	
(c) Total Receipts (from Line 19) .....	6726.76	19747.36
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	21767.21	29394.12
7. Total Disbursements (from Line 31) .....	4036.89	11663.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	17730.32	17730.32
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

North County Democratic Unity Political Action Coalition

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5337.58	6557.58
(i) Itemized (use Schedule A) .....	1389.18	7870.18
(ii) Unitemized .....	6726.76	14427.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	5000.00
(c) Other Political Committees (such as PACs) .....	6726.76	19427.76
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	319.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	6726.76	19747.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6726.76	19747.36

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4036.89	10113.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	4036.89	10113.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1350.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	200.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4036.89	11663.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4036.89	11663.80

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	6726.76	19427.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6726.76	19227.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4036.89	10113.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	319.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4036.89	9794.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Robert Hamilton

Mailing Address 3420 Casablanca Way

City

Fallbrook

State

CA

Zip Code

92028-8938

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: SA11AI-3-391-c

Amount of Each Receipt this Period

7.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Hamilton

Mailing Address 3420 Casablanca Way

City

Fallbrook

State

CA

Zip Code

92028-8938

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 7

Transaction ID: SA11AI-3-377-c

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Larry Miller

Mailing Address 1343 Macadamia Drive

City

Fallbrook

State

CA

Zip Code

92028-1112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Transaction ID: SA11AI-50-386-c

Amount of Each Receipt this Period

90.00

**SUBTOTAL** of Receipts This Page (optional) .....

127.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Larry Miller

Mailing Address 1343 Macadamia Drive

City

Fallbrook

State

CA

Zip Code

92028-1112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 7

Transaction ID: SA11AI-50-383-c

Amount of Each Receipt this Period

450.00

**B.**

Full Name (Last, First, Middle Initial)

Larry Miller

Mailing Address 1343 Macadamia Drive

City

Fallbrook

State

CA

Zip Code

92028-1112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: SA11AI-50-392-c

Amount of Each Receipt this Period

31.00

**C.**

Full Name (Last, First, Middle Initial)

Michele Bain

Mailing Address 2034 Santa Margarita Drive

City

Fallbrook

State

CA

Zip Code

92028-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI-249-414-c

Amount of Each Receipt this Period

195.00

Christmas Party

**SUBTOTAL** of Receipts This Page (optional) .....

676.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Michele Bain

Mailing Address 2034 Santa Margarita Drive

City

Fallbrook

State

CA

Zip Code

92028-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI-249-422-c

Amount of Each Receipt this Period

85.00

auction

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Gilby

Mailing Address 447 Waxflower Lane

City

Fallbrook

State

CA

Zip Code

92028-2448

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI-344-421-c

Amount of Each Receipt this Period

295.00

auction

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Gilby

Mailing Address 447 Waxflower Lane

City

Fallbrook

State

CA

Zip Code

92028-2448

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI-344-412-c

Amount of Each Receipt this Period

15.00

Christmas Party

**SUBTOTAL** of Receipts This Page (optional) .....

395.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Rancho North Coast Democratic Club

Mailing Address PO Box 1165

City

Solana Beach

State

CA

Zip Code

92075-7165

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4163.58

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 7

Transaction ID: SA11AI-227-385-c

Amount of Each Receipt this Period

4139.58

Only Federally Permissible  
Funds

**SUBTOTAL** of Receipts This Page (optional) .....

4139.58

**TOTAL** This Period (last page this line number only) .....

5337.58

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

A.

Full Name (Last, First, Middle Initial)

Patsy Cutler

Mailing Address 467 Fulvia Street

City Encinitas State CA Zip Code 92024-2146

Purpose of Disbursement  
Reimburse: Event supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-100-389-e

Date of Disbursement

10 / 09 / 2007

Amount of Each Disbursement this Period

187.68

B.

Full Name (Last, First, Middle Initial)

San Diego County Democratic Party

Mailing Address 8304 Clairemont Mesa Boulevard  
Suite 108

City San Diego State CA Zip Code 92111-1315

Purpose of Disbursement  
Club Charter Registration Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-81-404-e

Date of Disbursement

12 / 14 / 2007

Amount of Each Disbursement this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Patsy Cutler

Mailing Address 467 Fulvia Street

City Encinitas State CA Zip Code 92024-2146

Purpose of Disbursement  
Reimbursement: Food Beverage Event

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-100-406-e

Date of Disbursement

12 / 19 / 2007

Amount of Each Disbursement this Period

87.39

SUBTOTAL of Disbursements This Page (optional) .....

335.07

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Computer Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-64-354-e

Date of Disbursement

08 / 02 / 2007

Amount of Each Disbursement this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Computer Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-64-297-e

Date of Disbursement

07 / 03 / 2007

Amount of Each Disbursement this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

OCI Retail Computer Sciences

Mailing Address 1651 S Juniper Street

City Escondido State CA Zip Code 92025-6127

Purpose of Disbursement  
Computer Software Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-283-333-e

Date of Disbursement

07 / 06 / 2007

Amount of Each Disbursement this Period

56.94

**SUBTOTAL** of Disbursements This Page (optional) .....

206.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

<b>A.</b> Full Name (Last, First, Middle Initial) Del Stewart	<b>Transaction ID:</b> SB21B-213-338-e <b>Date of Disbursement</b>																				
Mailing Address 1651 S Juniper Street Unit 202	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	3		2	0	0	7												
City Escondido State CA Zip Code 92025-6139	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Computer Equipment Candidate Name	<table border="1"> <tr> <td colspan="10">659.24</td> </tr> </table>	659.24																			
659.24																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) OCI Retail Computer Sciences	<b>Transaction ID:</b> SB21B-283-353-e <b>Date of Disbursement</b>																				
Mailing Address 1651 S Juniper Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	7		2	0	0	7												
City Escondido State CA Zip Code 92025-6127	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Computer Software Candidate Name	<table border="1"> <tr> <td colspan="10">56.94</td> </tr> </table>	56.94																			
56.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) OCI Retail Computer Sciences	<b>Transaction ID:</b> SB21B-283-429-e <b>Date of Disbursement</b>																				
Mailing Address 1651 S Juniper Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City Escondido State CA Zip Code 92025-6127	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Computer Software Services Candidate Name	<table border="1"> <tr> <td colspan="10">56.94</td> </tr> </table>	56.94																			
56.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**773.12**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Computer Software

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-64-432-e

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Computer Software

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-64-433-e

Date of Disbursement

09 / 06 / 2007

Amount of Each Disbursement this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Computer Software Services

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-64-434-e

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

A.

Full Name (Last, First, Middle Initial)

OCI Retail Computer Sciences

Mailing Address 1651 S Juniper Street

City  
Escondido

State  
CA

Zip Code  
92025-6127

Purpose of Disbursement  
Computer Software Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-283-435-e

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

56.94

B.

Full Name (Last, First, Middle Initial)

OCI Retail Computer Sciences

Mailing Address 1651 S Juniper Street

City  
Escondido

State  
CA

Zip Code  
92025-6127

Purpose of Disbursement  
Computer Software Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-283-428-e

Date of Disbursement

09 / 13 / 2007

Amount of Each Disbursement this Period

56.94

C.

Full Name (Last, First, Middle Initial)

OCI Retail Computer Sciences

Mailing Address 1651 S Juniper Street

City  
Escondido

State  
CA

Zip Code  
92025-6127

Purpose of Disbursement  
Computer Software Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-283-430-e

Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

56.94

SUBTOTAL of Disbursements This Page (optional) .....

170.82

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Computer Software

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-64-431-e

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

James Edmondson

Mailing Address 9717 Thorn Lane

City Escondido State CA Zip Code 92029-7639

Purpose of Disbursement  
Reimb: Office Supplies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-233-339-e

Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 28360 Old Town Front Street

City Fallbrook State CA Zip Code 92028

Purpose of Disbursement  
Office: Post Office Box Rental

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5-351-e

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

40.00

**SUBTOTAL** of Disbursements This Page (optional) .....

157.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

A.

Full Name (Last, First, Middle Initial)

Angelique Strahan

Mailing Address 753 Highland Park

City Fallbrook State CA Zip Code 92028-4492

Purpose of Disbursement  
Fundraising: Reimburse: Fallbrook Picnic

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2-384-e

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

1081.00

B.

Full Name (Last, First, Middle Initial)

Michele Bain

Mailing Address 2034 Santa Margarita Drive

City Fallbrook State CA Zip Code 92028-1647

Purpose of Disbursement  
Reimburse: Holiday Event Supplies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-249-398-e

Date of Disbursement

11 / 26 / 2007

Amount of Each Disbursement this Period

64.39

C.

Full Name (Last, First, Middle Initial)

Michele Bain

Mailing Address 2034 Santa Margarita Drive

City Fallbrook State CA Zip Code 92028-1647

Purpose of Disbursement  
Food Beverage Holiday Fundraiser

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-249-407-e

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

226.91

SUBTOTAL of Disbursements This Page (optional) .....

1372.30

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

Larry Robinson Duo

Mailing Address P.O. Box 7987

City  
Fallbrook

State  
CA

Zip Code  
82028

Purpose of Disbursement  
Reimburse: Entertainment Expense

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-354-25-V

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

300.00

**[MEMO ITEM]**

Subitemization of Angeli-  
que Strahan

**B.**

Full Name (Last, First, Middle Initial)

El Toro Market

Mailing Address 337 N Main Avenue

City  
Fallbrook

State  
CA

Zip Code  
92028-1960

Purpose of Disbursement  
Fundraising: Reimburse: Fundraiser Food

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-350-22-V

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

549.00

**[MEMO ITEM]**

Subitemization of Angeli-  
que Strahan

**C.**

Full Name (Last, First, Middle Initial)

Ace Party Productions

Mailing Address 1456 S Mission Road

City  
Fallbrook

State  
CA

Zip Code  
92028-4009

Purpose of Disbursement  
Reimburse: Fundraiser Rental Fees

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-349-23-V

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

217.00

**[MEMO ITEM]**

Subitemization of Angeli-  
que Strahan

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North County Democratic Unity Political Action Coalition

**A.**

Full Name (Last, First, Middle Initial)

California Computer Center

Mailing Address 444 S. Flower Street

City  
Los Angeles

State  
CA

Zip Code  
90071

Purpose of Disbursement  
Computer Equipment and Supplies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-296-6-V

Date of Disbursement

07 / 11 / 2007

Amount of Each Disbursement this Period

659.24

**[MEMO ITEM]**

Subitemization of Del Stewart

**B.**

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 28360 Old Town Front Street

City  
Fallbrook

State  
CA

Zip Code  
92028

Purpose of Disbursement  
Reimbursement: Postage

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-5-16-V

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

14.00

**[MEMO ITEM]**

Subitemization of Bonnie Drolet

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

3240.25